

Name.....

Number.....

Cohort.....

Field.....



PRACTICE ASSESSMENT DOCUMENT

NURSING

PART 3

BNurs/MNurs

Future Nurse: Standards of proficiency for registered nurses, (NMC 2018)

This Practice Assessment Document has been developed by the Pan London Practice Learning Group in collaboration with practice partners, mentors, academic staff, students and service users across London, the Midlands, Yorkshire and the East of England regions.

The development of this document was funded by Health Education England (London)



**Pan-Midlands, Yorkshire & East
Practice Learning Group**



Please keep your Practice Assessment Document with you at all times in practice in order to review your progress with your Practice Supervisor, Practice Assessor and/or Academic Assessor.

MYEPAD Version 1 Validation 13/05/2019

PAN Midlands, Yorkshire and East Practice Learning Group

This Practice Assessment Document has been developed by the Pan London Practice Learning Group in collaboration with practice partners, mentors, academic staff, students and service users across London, the Midlands, Yorkshire and the East of England regions and will be used by students attending the following Universities:

Anglia Ruskin University
Birmingham City University
Coventry University
De Montfort University
Derby University
Huddersfield University
Keele University
Leeds Beckett University
Nottingham Trent University
Sheffield Hallam University
Staffordshire University
University of Bedfordshire
University of Birmingham
University of Bradford
University College of Birmingham
University of East Anglia
University of Essex
University of Hull
University of Leeds
University of Leicester
University of Lincoln
University of Nottingham
University of Northampton
University of Sheffield
University of Suffolk
University of Wolverhampton
University of Worcester
University of York



Pan-Midlands, Yorkshire & East Practice Learning Group



Contents	Page
Welcome to the Practice Assessment Document (PAD)	1
Guidance for Using the PAD	3
University of Wolverhampton Specific Guidelines	4
Criteria for Assessment in Practice	5
List of Practice Supervisors	7
List of Practice Assessors and Academic Assessors	8
Placement Hub	9
Assessment of Proficiencies	32
Part 3 Episode of Care 1	43
Part 3 Episode of Care 2	46
Part 3 Medicines Management	49
Action Plan	52
Record of Practice Hours	54

Statement regarding the use of the term “Parts”

There are three Practice Assessment Documents in total, which incorporate the range of Future Nurse Standards of proficiency (NMC 2018). “Parts” in this context is used to represent the range of outcomes to be achieved by students at different levels. These parts may differ from the parts of the education programme that will be defined locally by each university provider.

Welcome to the Practice Assessment Document (PAD)

Student responsibilities

This Practice Assessment Document is designed to support and guide you towards successfully achieving the criteria set out in the *Future nurse: Standards of proficiency for registered nurses and Standards for education and training* (NMC 2018).

The PAD makes up a significant part of your overall programme assessment. It will need to be processed through formal University systems. Continuous assessment is an integral aspect of assessment in practice and you are expected to show evidence of consistent achievement. You should engage positively in all learning opportunities, take responsibility for your own learning and know how to access support. You will work with and receive written feedback from a range of staff including Practice Supervisors and Practice Assessors and you are required to reflect on your learning.

You are responsible for raising concerns with a nominated person in the practice setting in a timely manner. You should also alert staff to any reasonable adjustments that may be required to support your learning.

You should ensure you are familiar with your university assessment and submission processes for this document and contact the academic representative from your university, or refer to your university's intranet if you require support or advice on specific university procedures.

The Ongoing Achievement Record (OAR) is a separate document that summarises your achievements in each placement and with the main document provides a comprehensive record of your professional development and performance in practice.

You are responsible for the safekeeping and maintenance of the PAD. It should be available to your Practice Supervisor, Practice Assessor and Academic Assessor at all times when you are in placement together with the OAR. Alterations should be made in this document by crossing through with one line, with a signature and date.

You will have access to confidential information when in practice placements. The PAD should not contain any patient/service user/carer identifiable information. Contents must not be disclosed to any unauthorised person or removed, photocopied or used outside the placement or university.

People must be offered the opportunity to give and if required withdraw their informed consent to student participation in their care and staff in practice will provide guidance as required. Before approaching any patient/service user/carer for feedback you must discuss with your Practice Supervisor/Practice Assessor who will facilitate consent.

Practice Supervisor responsibilities (Registered nurse/midwife or other registered health/social care professional)

In many practice areas the student will be supported by a number of Practice Supervisors. Some areas may adopt a team based approach due to the nature of the experience.

As a Practice Supervisor you have an important role in supporting and guiding the student through their learning experience to ensure safe and effective learning. This includes facilitating learning opportunities including any reasonable adjustments the student may need to get maximum benefit from the placement. It is your responsibility to contribute to the student's assessment through the recording of regular feedback on their progress towards, and achievement of their proficiencies. Specific feedback must be provided to the Practice Assessor on the student's progress.

Supervision in other placement areas (i.e. those areas where there are no health/social care registrants)

A range of staff can support student learning and have a vital role in student learning and development though may not be contributing formally to assessment of proficiencies.

However, these staff members are encouraged to support learning and can provide valuable student feedback within the PAD on the *Record of communication/additional feedback pages*.

Practice Assessor responsibilities

As a Practice Assessor you have a key role in assessing and confirming the student's proficiency providing assurance of student achievements and competence. This includes facilitating learning opportunities including any reasonable adjustments the student may need to get maximum benefit from the placement. You will observe the student, conduct and record student assessments informed by student reflections, feedback from Practice Supervisors and other relevant people to confirm achievement. You will liaise with the Academic Assessor scheduling communication at relevant points.

There are numerous elements requiring assessment in practice. One or more Practice Supervisors can contribute to the assessment of some of the proficiencies in discussion with you, but they must be working in their scope of practice.

When assessing the student, you should take into account sources of evidence that encompass knowledge, skills, attitudes and the views of those receiving care. Comments should acknowledge those exceptional students who are exceeding expectations for their stage in practice or who have particularly commendable attitudes, behaviours, knowledge or skills.

If the student is not meeting the required standards this should be highlighted as a development need. If there is a cause for concern or a fitness for practice issue that requires prompt action, an Action Plan should be instigated to address specific needs or concerns within a specified timeframe. In the event of this, seek guidance from the Academic Assessor and/or senior practice representative.

Academic Assessor responsibilities

Academic Assessors are Registered Nurses and are nominated for each part of the educational programme. The same Academic Assessor cannot contribute to the student assessment in consecutive parts. The Academic Assessor will work in partnership with the Practice Assessor to evaluate and recommend the student for progression for each part of the educational programme. The Academic Assessor will enable scheduled communication and collaboration with the Practice Assessor and this communication can take a variety of forms.

All communications/ additional feedback (not already recorded in the scheduled interviews) from the Practice Supervisors, Practice Assessor and Academic Assessor and other staff members needs to be recorded on the relevant pages in the PAD.

Guidance for using the PAD to facilitate learning and assessment in practice

Assessment criteria in the PAD are based on the NMC *Future nurse: Standards of proficiency for registered nurses* and *Standards for education and training* (NMC 2018). The outcome statements have been designed by the NMC to apply across all four fields of nursing practice and all care settings (NMC 2018). *Students must be able to demonstrate a greater depth of knowledge and the additional more advanced skills required to meet the specific care needs of people in their chosen fields of nursing practice* (NMC, 2018, p6). **This Practice Assessment Document can be used in any field of practice.**

Components of Assessment and Feedback (see individual university guidance/regulations)

Professional Values: Professional Values reflect a number of proficiency statements and are captured under the 4 sections of The Code (NMC 2015). All must be achieved *by the end of each placement*.

Proficiencies: These reflect aspects of the 7 Platforms, communication and relationship management skills and nursing procedures (NMC 2018). These can be assessed in a range of placements, but must be achieved at least once *by the end of the Part*.

Episode of Care: This holistic assessment(s) facilitates and demonstrates the student's progress and must be achieved *by the end of the Part*.

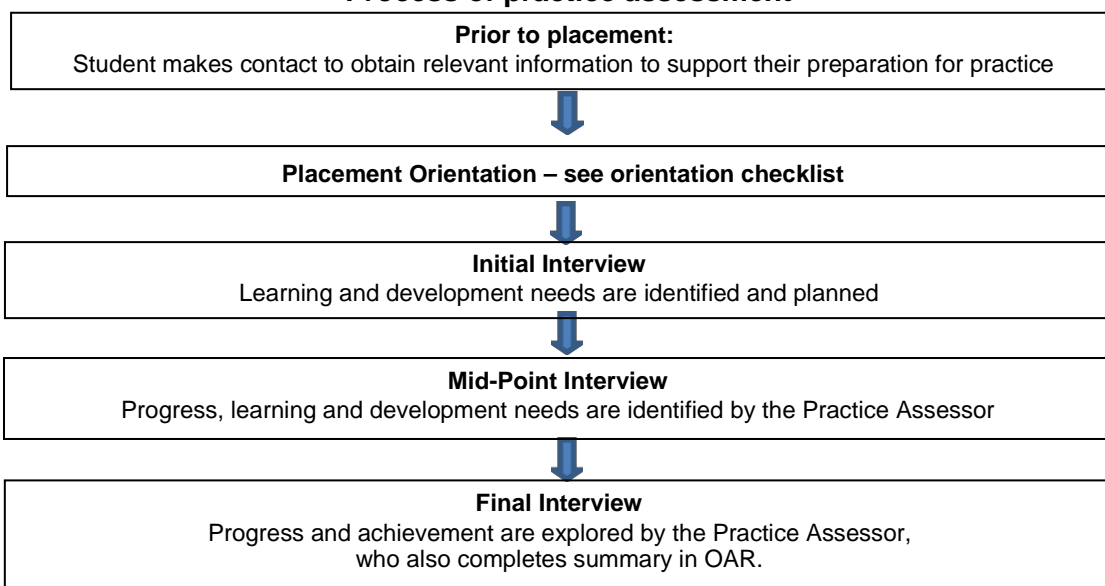
Medicines Management: There is one assessment included in each part and each must be achieved *by the end of the Part*.

Patient/Service User/Carer Feedback Form: Feedback will be sought in relation to how the student cared for the person receiving care. This is not formally assessed, but will contribute to overall student feedback.

Recording Additional Experiences and Feedback: There are additional pages for the student to record reflections on their own learning and pages to record communication and additional feedback from all those supporting learning and assessment.

Ongoing Achievement Record: The OAR summarises overall achievements and provides a comprehensive record of student development and overall performance.

Process of practice assessment



Further information / guidance is included in the university specific pages (overleaf) and in the *Practice Assessment Document Guide*

Hub and Spoke Placement Model

To ensure that you experience a wide range of placements a hub and spoke placement allocation model is used. This model requires a hub placement to be allocated for each part of the course and the practice assessor in the hub placement will be responsible for completing the preliminary, progress and final interviews. The documentation relating to Placement Hub in this document relates to your hub placement.

Whilst on your hub placement you will also be allocated to spoke placements. These spoke placements will be a minimum of one week and a maximum of four weeks, and are designed to give you breadth of experience. The practice supervisor will provide feedback on your performance in the spoke placements and this information will be used by the practice assessor when making an overall judgement on your practice assessment. The documentation titled Spoke Placements in this document relates to your spoke placements and one page should be completed for each spoke placement.

For further information regarding any aspect of placement learning please refer to the Placement Learning Handbook, a copy of which is available through a member of the practice team or on the CANVAS topic, Placement Learning for Nurses. Please note the following additional information that you will find useful relating to this document and to your placement:

Confidentiality: must NOT be breached; care plans must NOT be photocopied and used for evidence. Where additional evidence is required, it MUST respect the confidentiality of ALL of those involved in the health care episode, not just the service user. Any breach of confidentiality will result in an instant fail in your practice assessment.

Safe Keeping of PAD- You must ensure the safekeeping of this document and should NOT leave it with anyone else. As practice outcomes are now an integrated part of module assessment, you will be recorded as a non-submission grade for the module if the PAD is not submitted on time. This document MUST NOT be separated, as it is an assessment document. Any additional evidence needs to be clearly cross-referenced against the assessment criteria.

Study Time- you will be allocated mandatory theory and practice study days to attend in university during your placement allocation. Theory study days relate to modules that you are studying. Practice study days will enable critical reflective discussion on key issues. All study days will be directed by the University and attendance is mandatory.

Sickness/absence- It is your responsibility to report all sickness/ absence to external partnerships on 01902 518630 or email: FEHWexternalpartnerships@wlv.ac.uk and it is essential that you inform the placement area immediately, in accordance with the organisation's sickness/absence policy. Practice assessors/supervisors are also requested to report student absences of three days or more to a member of the practice team or external partnerships team.

If you have more than 3 occasions of sickness/absence in any one year you will be interviewed by your assessors/supervisor to establish if there are health or personal problems affecting your fitness to practice. You do not have to disclose the details of any health problem, but if there are concerns, your practice assessor/supervisor will contact the practice team to ensure appropriate referral to occupational health or counselling services. Poor attendance and timekeeping without legitimate reason has a negative impact upon team working and may prevent you from successfully completing the NMC proficiency standards, which may result in a fail grade being awarded for the placement.

Any practice hours not completed due to sickness/absence must be retrieved during the year and must be agreed with the practice team and practice placement manager/clinical placement facilitator. You may not be able to progress to the next year if you have not retrieved all of your practice hours.

Whilst on placement retrieving practice hours, you are required to work to the same level of competence that was assessed at the progression point. Failure to do so may result in the commencement of an action plan, which will be carried forward into the next year or referral to the suitability panel to consider your continuation on the course.

Support Available - The practice team and academic assessors are available for practice assessors/supervisors and students to contact at any time during the placement learning period. The practice team can offer guidance and support with difficult and/or complex

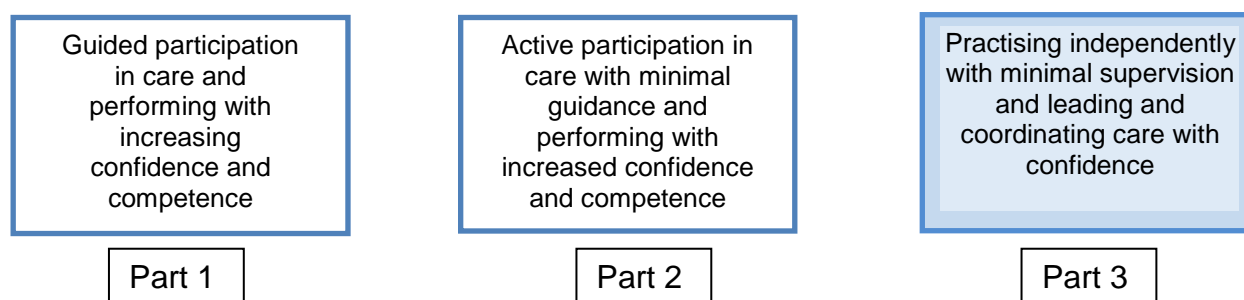
situations to try to ensure that you have every opportunity to achieve the expected outcomes. The practice assessor/supervisor must contact the practice team if there are concerns regarding a student's attendance and/or performance. Students may also contact their personal tutor for advice.

7. Submission of PAD– You MUST submit this PAD to the relevant student office on the date given and attach the relevant barcode sheet from e:vision. If the PAD has not been completed for a specific reason you may apply for a 1-week extension through e:vision you MUST provide evidence to support your application. If your practice assessor is not available to complete your assessment a member of the practice team may be able to provide evidence to support your request for an extension. This will allow you time to meet with your assessor and complete the documentation. It does not allow an extra week on placement. If having an extension will not resolve your problems or if you were off sick/absent at the end of the placement, you should consider applying for extenuating circumstances in e:Vision, as any incomplete or non-submitted documents will be recorded as a refer (fail) in practice. You will only be allowed one further attempt at practice.

8. Students with Disclosed Disabilities -This practical assessment document must be completed in line with all reasonable adjustments to which students may be entitled if they have a diagnosed disability which has been disclosed, assessed and recognised by the University. The student will require evidence of such entitlement through a practice awareness sheet. The reasonable adjustments applied to student placement learning must not detract from the competences to be met in order to successfully complete the learning outcomes required of the placement. Please see orientation pages for disability disclosure statements relating to reasonable adjustments.

Criteria for Assessment in Practice

Overall Framework Parts 1 – 3 to be achieved by the end of the part



The decision on the level of supervision provided for students should be based on the needs of the individual student. The level of supervision can decrease with the student's increasing proficiency and confidence. (NMC, 2018, p 5)

Part 3: Leads and coordinates care

'Achieved' must be obtained in all three criteria by the student

Achieved	Knowledge	Skills	Attitude and Values
YES	Has a comprehensive knowledge-base to support safe and effective practice and can critically justify decisions and actions using an appropriate evidence-base.	Is able to safely, confidently and competently manage person centred care in both predictable and less well recognised situations, demonstrating appropriate evidence based skills.	Acts as an accountable practitioner in responding proactively and flexibly to a range of situations. Takes responsibility for own learning and the learning of others.
NO	Is only able to identify the essential knowledge-base with poor understanding of rationale for care. Is unable to justify decisions made leading to unsafe practice.	With minimal supervision is not able to demonstrate safe practice despite guidance.	Demonstrates lack of self-awareness and professionalism. Does not take responsibility for their own learning and the learning of others.

List of Practice Supervisors

A sample signature must be obtained for all entries within this document

Name (please print)	Job Title	Signature	Initials	Placement

List of Practice Assessors

A sample signature must be obtained for all entries within this document

Name (please print)	Job Title	Signature	Initials	Placement

List of Academic Assessors

A sample signature must be obtained for all entries within this document

Name (please print)	Job Title	Signature	Initials	Placement

Placement Hub

Placement Provider:
(e.g. Trust/Organisation)

Name of Placement Area:

Type of Experience:
(e.g. Community/Ward based)

Placement Telephone Number:

Placement Contact Email:

Start Date..... End Date..... No. of Hours.....

Nominated person to support student and address concerns

Name:

Designation:

Contact email address:

Practice Assessor Details:

Name:

Designation:

Contact email address:

Academic Assessor Details (for part):

Name:

Designation:

Contact email address:

Placement: Orientation

		Placement Hub		Placement Spoke	
Name of Placement Area:					
Name of Staff Member:					
This should be undertaken by a member of staff in the Placement Area		Initial/Date (Student)	Initial/Date (Staff signature)	Initial/Date (Student)	Initial/Date (Staff signature)
The following criteria need to be met within the first day in placement					
A general orientation to the health and social care placement setting has been undertaken					
The local fire procedures have been explained Tel.....					
The student has been shown the: <ul style="list-style-type: none"> • fire alarms • fire exits • fire extinguishers 					
Resuscitation policy and procedures have been explained Tel:					
Resuscitation equipment has been shown and explained					
The student knows how to summon help in the event of an emergency					
The student is aware of where to find local policies <ul style="list-style-type: none"> • health and safety • incident reporting procedures • infection control • handling of messages and enquiries • other policies 					
The student has been made aware of information governance requirements					
The shift times, meal times and reporting sick policies have been explained					
The student is aware of his/her professional role in practice					
Policy regarding safeguarding has been explained					
The student is aware of the policy and process of raising concerns					
Lone working policy has been explained (if applicable)					
Risk assessments/reasonable adjustments relating to disability/learning/pregnancy needs have been discussed (where disclosed)					
The following criteria need to be met prior to use					
The student has been shown and given a demonstration of the moving and handling equipment used in the placement area					
The student has been shown and given a demonstration of the medical devices used in the placement area					

	Placement Spoke		Placement Spoke	
Name of Placement Area:				
Name of Staff Member:				
This should be undertaken by a member of staff in the Placement Area	Initial/Date (Student)	Initial/Date (Staff signature)	Initial/Date (Student)	Initial/Date (Staff signature)
The following criteria need to be met within the first day in placement				
A general orientation to the health and social care placement setting has been undertaken				
The local fire procedures have been explained Tel.....				
The student has been shown the: <ul style="list-style-type: none"> • fire alarms • fire exits • fire extinguishers 				
Resuscitation policy and procedures have been explained Tel:				
Resuscitation equipment has been shown and explained				
The student knows how to summon help in the event of an emergency				
The student is aware of where to find local policies <ul style="list-style-type: none"> • health and safety • incident reporting procedures • infection control • handling of messages and enquiries • other policies 				
The student has been made aware of information governance requirements				
The shift times, meal times and reporting sick policies have been explained				
The student is aware of his/her professional role in practice				
Policy regarding safeguarding has been explained				
The student is aware of the policy and process of raising concerns				
Lone working policy has been explained (if applicable)				
Risk assessments/reasonable adjustments relating to disability/learning/pregnancy needs have been discussed (where disclosed)				
The following criteria need to be met prior to use				
The student has been shown and given a demonstration of the moving and handling equipment used in the placement area				
The student has been shown and given a demonstration of the medical devices used in the placement area				

Placement Hub: Initial Interview

(This can be completed by a Practice Supervisor or Practice Assessor.

If completed by the PS they must discuss and agree with the PA)

This meeting should take place within the first week of the placement

Placement Area Name:

Student to identify learning and development needs (with guidance from the Practice Supervisor)

Taking available learning opportunities into consideration, the student and Practice Supervisor/Practice Assessor to negotiate and agree a learning plan.

Outline of learning plan

How will this be achieved?

Learning plan for placement agreed by Practice Assessor (where applicable) YES/NO

Student's Name:

Signature:

Date:

Practice Supervisor/Assessor's Name:

Signature:

Date:

Professional Values in Practice (Part 3)

Students are required to demonstrate high standards of professional conduct at all times during their placements. Students should work within ethical and legal frameworks, and be able to articulate the underpinning values of The Code (NMC, 2015). Professional Values reflect a number of proficiency statements and are captured under the 4 sections of The Code. (1BAP 1.2)

The Practice Assessor has responsibility for assessing Professional Values though the Mid-Point review can be completed by a Practice Supervisor in liaison with the Practice Assessor.

Yes = Achieved, No = Not Achieved (Refer to Criteria for Assessment in Practice)

	Achieved Mid-Point Yes/No	Initial/ Date	Achieved Final Yes/No	Initial/ Date (Final)
Prioritise people				
1. The student maintains confidentiality in accordance with the NMC code and recognises limits to confidentiality for example public interest and protection from harm. (1BAP 1.1, 3ANPC 3.9)				
2. The student is non-judgemental, respectful and courteous at all times when interacting with patients/service users and all colleagues.(1BAP 1.14)				
3. The student maintains the person's privacy and dignity, seeks consent prior to care, challenges discriminatory behaviour and advocates on their behalf. (1BAP 1.4, 3 ANPC 3.6, 4PEC 4.1)				
4. The student is caring, compassionate and sensitive to the needs of others demonstrating positive role modelling. (1BAP 1.14, 4PEC 4.4)				
5. The student understands their professional responsibility in adopting and promoting a healthy lifestyle for the well-being of themselves and others.(1 BAP 1.5, 1.6)				
Practise effectively				
6. The student consistently delivers safe, person-centred and evidence based care ensuring patients/service users/carers are at the centre of decision-making. (4 PEC)				
7. The student is able to work confidently and as an equal partner within the inter-disciplinary team and can build effective professional relationships. (1BAP1.13, 1BAP 1.18, 5LNCWIT 5.1, 5.4)				
8. The student makes consistent effort to engage in and reflect on their learning, contributing to their own professional development and supporting the learning and development of others. (1 BAP 1.7, 1.8, 1.17)				
9. The student demonstrates leadership skills and is able to work autonomously, seeks support where appropriate and responds positively to feedback. (5LNCWIT 5.1, 5.6, A1.1, A1.6)				
Preserve safety				
10. The student demonstrates openness (candour), trustworthiness and integrity. (1 BAP 1.3)				
11. The student reports any concerns to a member of staff when appropriate and escalates as required (as per local policy/professional guidance) e.g. safeguarding. (1 BAP 1.3, 3ANPC 3.9)				
12. The student demonstrates the appropriate listening skills, seeks clarification where appropriate and carries out instructions safely. (1 BAP 1.11, A1.1, A1.6)				
13. The student is able to recognise and work within the limitations of own knowledge, skills and professional boundaries and understand that they are responsible for their own actions. (1 BAP 1.8, 1 BAP 1.17)				

Placement Hub: Mid-Point Interview

This discussion must take place half way through the placement

Student's self-assessment/reflection on progress Reflect on your overall progression referring to your personal learning needs, professional values and proficiencies. Identify your strengths and document areas for development.
Knowledge:
Skills:
Attitudes and values:
Practice Assessor's comments Discuss with the student their self-assessment and comment on their progression using the criteria for Assessment in Practice Descriptors, detailing evidence used to come to your decision.
Knowledge:
Skills:
Attitudes and values:

Placement Hub: Mid-Point Review
Ongoing learning and development needs

To be agreed between Practice Assessor and Student – sign and date all entries below

Following the Mid-Point interview the student is to identify their learning and development needs for the remainder of the placement and negotiate with their Practice Assessor how these will be achieved.

Learning and development needs	How will these be achieved?

Student's Name:

Signature:

Date:

Practice Assessor's Name:

Signature:

Date:

Any outstanding learning and development needs are to be discussed and documented at the final interview.

Placement Hub: Final Interview

This should take place towards the end of the placement

Student's self-assessment/reflection on progress Reflect on your overall progression referring to your personal learning needs, professional values and proficiencies. Identify your strengths and document areas for development.
Knowledge:
Skills:
Attitudes and values:
Practice Assessor's comments Discuss with the student their self-assessment and comment on their progression using the criteria for Assessment in Practice Descriptors, detailing evidence used to come to your decision.
Knowledge:
Skills:
Attitudes and values:

Please record any further comments on the next page

Learning and Development Needs

To be agreed between the Practice Assessor and Student

Practice Assessor to identify specific areas to take forward to the next placement

Was an Action Plan required to support the student?

YES / NO

If Yes, was the Academic Assessor informed?

YES / NO

Checklist for assessed documents	Tick	Practice Assessor Initial	Student Initial
The professional value statements have been signed at both Mid-Point and Final Interview			
The relevant proficiencies/skills that the student has achieved in this area (where applicable) have been signed			
The practice placement hours have been checked and signed			
All the interview records and development plans have been completed and signed as appropriate			
The Practice Supervisors and Practice Assessor have printed and signed their name on the appropriate list at the beginning of the document.			
The Practice Assessor has completed the Ongoing Achievement Record (OAR)			

Student's Name: _____ **Signature:** _____ **Date:** _____



Practice Assessor's Name: _____ **Signature:** _____ **Date:** _____

Additional Signature (If Applicable, e.g. Academic Assessor):
Name: _____ **Signature:** _____ **Date:** _____

Patient/Service User/Carer Feedback Form

Practice Supervisors/Practice Assessors should obtain consent from patients/service users/carers who should feel able to decline to participate.

We would like to hear your views about the way the student nurse has supported your care. Your feedback will not change the way you are cared for and will help the student nurse's learning.

Tick if you are:	The Patient/Service User	Carer/Relative
How happy were you with the way the student nurse...	Very Happy 	Happy 
...cared for you?	<input type="radio"/>	<input type="radio"/>
...listened to you?	<input type="radio"/>	<input type="radio"/>
...understood the way you felt?	<input type="radio"/>	<input type="radio"/>
talked to you?	<input type="radio"/>	<input type="radio"/>
...showed you respect?	<input type="radio"/>	<input type="radio"/>
What did the student nurse do well?		
What could the student nurse have done differently?		
Practice Supervisor/Practice Assessor: <div style="display: flex; justify-content: space-between;"> <div>Name:</div> <div>Signature:</div> <div>Date:</div> </div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div>Student Name:</div> <div>Signature:</div> <div>Date:</div> </div>		
<i>This form has been co-produced by Pan London Service Users across 4 fields of practice, 2013.</i>		

Record of working with and learning from others/inter-professional working

Student Reflection: Reflect on your learning in outreach/short placements or with members of the multi-disciplinary team who are supervising your learning and summarise below:

Student Name:	Signature:	Date:
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Practice Supervisor's Comments:

Practice Supervisor Name:	Signature:	Date:
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Student Reflection: Reflect on your learning in outreach/short placements or with members of the multi-disciplinary team who are supervising your learning and summarise below:

Student Name:	Signature:	Date:
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Practice Supervisor's Comments:

Practice Supervisor Name:	Signature:	Date:
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More pages can be downloaded as per University guidelines

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Student Name:

Signature:

Date:

Practice Supervisor's Comments:

Practice Supervisor Name:

Signature:

Date:

Student Reflection: Reflect on your learning in outreach/short placements or with members of the multi-disciplinary team who are supervising your learning and summarise below:

Student Name:

Signature:

Date:

Practice Supervisor's Comments:		
Practice Supervisor Name:	Signature:	Date:

More pages can be downloaded as per University guidelines

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Student Reflection: Reflect on your learning in outreach/short placements or with members of the multi-disciplinary team who are supervising your learning and summarise below:		
Student Name:	Signature:	Date:
Practice Supervisor's Comments:		
Practice Supervisor Name:	Signature:	Date:
Student Reflection: Reflect on your learning in outreach/short placements or with members of the multi-disciplinary team who are supervising your learning and summarise below:		

Student Name:	Signature:	Date:
Practice Supervisor's Comments:		
Practice Supervisor Name:	Signature:	Date:

More pages can be downloaded as per University guidelines

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Student Name:	Signature:	Date:

Practice Supervisor's Comments:		
Practice Supervisor Name:	Signature:	Date:
Student Reflection: Reflect on your learning in outreach/short placements or with members of the multi-disciplinary team who are supervising your learning and summarise below:		
Student Name:	Signature:	Date:
Practice Supervisor's Comments:		
Practice Supervisor Name:	Signature:	Date:

More pages can be downloaded as per University guidelines

Record of working with and learning from others/inter-professional working

Student Reflection: Reflect on your learning in outreach/short placements or with members of the multi-disciplinary team who are supervising your learning and summarise below:
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Student Name:	Signature:	Date:
Practice Supervisor's Comments:		
Practice Supervisor Name:	Signature:	Date:
Student Reflection: Reflect on your learning in outreach/short placements or with members of the multi-disciplinary team who are supervising your learning and summarise below:		
Student Name:	Signature:	Date:
Practice Supervisor's Comments:		
Practice Supervisor Name:	Signature:	Date:

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Student Reflection: Reflect on your learning in outreach/short placements or with members of the multi-disciplinary team who are supervising your learning and summarise below:

Student Name:	Signature:	Date:
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Practice Supervisor's Comments:

Practice Supervisor Name:	Signature:	Date:
----------------------------------	-------------------	--------------

Student Reflection: Reflect on your learning in outreach/short placements or with members of the multi-disciplinary team who are supervising your learning and summarise below:

Student Name:	Signature:	Date:
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Practice Supervisor's Comments:

Practice Supervisor Name:	Signature:	Date:
----------------------------------	-------------------	--------------

More pages can be downloaded as per University guidelines

These records can be completed by Practice Supervisors, Practice Assessors, Academic Assessor or any other members of the team involved in the supervision and/or assessment of the student.

Communication/additional feedback	
Name:	Designation:
Signature:	Date:
Communication/additional feedback	
Name:	Designation:
Signature:	Date:
Communication/additional feedback	
Name:	Designation:
Signature:	Date:

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Signature:	Date:
Communication/additional feedback	
Name:	Designation:
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Communication/additional feedback	
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Name:	Designation:
Signature:	Date:
Communication/additional feedback	
Name:	Designation:
Signature:	Date:
Communication/additional feedback	
Name:	Designation:
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Communication/additional feedback	
Name:	Designation:
Signature:	Date:
Communication/additional feedback	
Name:	Designation:
Signature:	Date:
Communication/additional feedback	
Name:	Designation:
Signature:	Date:

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Assessment of Proficiencies

Incorporating Platforms 1 – 7
Annexe A: Communication and relationship
management skills Annexe B: Nursing procedures

These proficiencies ***“apply to all registered nurses, but the level of expertise and knowledge required will vary depending on the chosen field(s) of practice”***. (NMC, *Future Nurse*, 2018, p22, 26)

Assessment of Proficiencies are undertaken across the Part. These can be assessed in a range of placements but need to be assessed as Achieved (YES) at least once by the end of the Part. If a proficiency is assessed as Achieved (YES) early in the Part it is expected that the student maintains that level of competence and can be re-assessed in subsequent placements at the Practice Assessor's discretion.

The Grade Descriptors are 'Yes' (this proficiency has been achieved), 'No' (this proficiency has not been achieved). Refer to Criteria for Assessment in Practice for further details.

The Practice Supervisor can contribute to the assessment of some of these proficiencies (in discussion with the Practice Assessor). The Practice Supervisor at this stage must be a registered nurse with a minimum of six months experience and working within their scope of practice.

Some of the proficiencies may be met within simulated learning as per the individual university's policy.

Proficiencies marked with an * can be met in either Part 2 or Part 3 and please refer to pages 41-43 and to the OAR to confirm achievement of these.

Part 3 Assessment of Performance: The individual completing the assessment should draw on a range of observed experiences in which the student demonstrates the required knowledge, skills, attitudes and values in co-ordinating high quality person/family centred care, ensuring all care is underpinned by effective communication skills. **Those marked with an * may have been met in Part 2. Record achievement of Part 3 proficiencies marked * 3 in OAR as well.**

Confidently assesses needs and plans person-centred care

	YES = Achieved, NO = Not Achieved							
	Assessment 1		Assessment 2		Assessment 3		Assessment 4	
	Yes/No	Sign/Date	Yes/No	Sign/Date	Yes/No	Sign/Date	Yes/No	Sign/Date
1. Utilises a range of strategies/resources (including relevant diagnostic equipment) to undertake a comprehensive whole body assessment to plan and prioritise evidence-based person-centred care (3ANPC 3.2,3.3)								
2. Assesses a persons' capacity to make best interest decisions about their own care and applies processes for making reasonable adjustments when a person does not have capacity. (1BAP 1.12, 3ANPC 3.6. 3ANPC 3.7)								
3 Actively participates in the safe referral of people to other professionals or services such as cognitive behavioural therapy or talking therapies across health and social care as appropriate. (3ANPC 3.16, A 3.4, A3.6)								

If any proficiency has not been assessed or is not applicable to the Practice area, please leave blank.

Confidently delivers and evaluates person-centred care								
	YES = Achieved, NO = Not Achieved							
	Assessment 1		Assessment 2		Assessment 3		Assessment 4	
	Yes/No	Sign/Date	Yes/No	Sign/Date	Yes/No	Sign/Date	Yes/No	Sign/Date
* 4. Recognises signs of deterioration (mental distress/emotional vulnerability/physical symptoms) and takes prompt and appropriate action to prevent or reduce risk of harm to the person and others using for example positive behavioural support or distraction and diversion strategies. (1BAP 1.12, 4PEC 4.10, 3ANPC 3.9, 3.10, A3.8, A3.9, B1.1.1-B1.1.5, B10.1)								
5. Accurately and legibly records care, with the use of available digital technologies where appropriate, in a timely manner. (5LMNWIT 5.11, A1.8, A1.10)								
6. Works in partnership with people, families and carers using therapeutic use of self to support shared decision making in managing their own care. (4PEC 4.2, 4.3, 4PEC 4.10)								

If any proficiency has not been assessed or is not applicable to the Practice area, please leave blank.

Confidently delivers and evaluates person-centred care								
	YES = Achieved, NO = Not Achieved							
	Assessment 1		Assessment 2		Assessment 3		Assessment 4	
	Yes/No	Sign/Date	Yes/No	Sign/Date	Yes/No	Sign/Date	Yes/No	Sign/Date
7. Manages a range of commonly encountered symptoms of increasing complexity including pain, distress, anxiety and confusion. (4PEC4.4, 4.5, 4.8, A1.10)								
8. Uses skills of active listening, questioning, paraphrasing and reflection to support therapeutic interventions using a range of communication techniques as required. (A1.1, A2.5, A2.6, A3.6, 3.8, 3.9)								
9. Is able to support people distressed by hearing voices or experiencing distressing thoughts or perceptions. (B1.1.1)								
Confidently manages the procedures in assessing, providing and evaluating care								
10. Manages all aspects of personal hygiene, promotes independence and makes appropriate referrals to other healthcare professionals as needed (e.g. dentist, optician, audiologist). (B4.1, B4.3, B4.5)								
11. Manages the care of people with specific nutrition and hydration needs demonstrating understanding of and the contributions of the multidisciplinary team. (4PEC 4.6, 5LMNCWIT 5.4)								

Confidently manages the procedures in assessing, providing and evaluating care								
	YES = Achieved, NO = Not Achieved							
	Assessment 1		Assessment 2		Assessment 3		Assessment 4	
	Yes/No	Sign/Date	Yes/No	Sign/Date	Yes/No	Sign/Date	Yes/No	Sign/Date
12. Manages the care of people who are receiving IV fluids and accurately records fluid intake and output, demonstrating understanding of potential complications. (B5.4, 5.8)								
* 13. Manages the care of people receiving fluid and nutrition via infusion pumps and devices including the administration of medicines where required. (B5.9)								
14. Manage and monitor the effectiveness of symptom relief medication, with the use of infusion pumps and other devices. (B10.2)								
15. Manages the care of people with specific elimination needs for example urinary and faecal incontinence and stoma care. (4PEC 4.6, B6.4, B6.6)								
16. Demonstrates an understanding of the need to administer enemas and suppositories and undertake rectal examination and digital rectal evacuation as appropriate. (B6.5)								
17. Demonstrates the ability to respond and manage risks in relation to infection prevention and control and take proactive measures to protect public health e.g. immunisation and vaccination policies (2PHPIH 2.11, 2.12, 7CC 7.11, B9.1)								

Confidently leads and manages person-centred care and working in teams								
	YES = Achieved, NO = Not Achieved							
	Assessment 1		Assessment 2		Assessment 3		Assessment 4	
	Yes/No	Sign/Date	Yes/No	Sign/Date	Yes/No	Sign/Date	Yes/No	Sign/Date
18. Understands roles, responsibilities and scope of practice of all members of the multidisciplinary team and interacts confidently when working with these members. (5LNCWIT 5.1, 5.2, 5.4)								
19. Effectively manages and prioritises the care needs of a group of people demonstrating appropriate communication and leadership skills to delegate responsibility for care to others in the team as required. (5LNWIT 5.1, 5.5, A1.9, A1.11)								
20. Monitors and evaluates the quality of care delivery by all members of the team to promote improvements in practice and understand the process for performance management of staff (if required). (5LNCWIT 5.3, 5.7, 5.10, A4.2.2)								
Confidently contributes to improving safety and quality of person-centred care								
21. Actively participates in audit activity and demonstrates understanding of appropriate quality improvement strategies. (6ISQC 6.4, 6.7, 6.9)								
22. Undertakes accurate risk assessments and demonstrates an understanding of relevant frameworks, legislation and regulations for managing and reporting risks. (6ISQC 6.1, 6.2, 6.3, 6.5)								

Confidently contributes to improving safety and quality of person-centred care								
	YES = Achieved, NO = Not Achieved							
	Assessment 1		Assessment 2		Assessment 3		Assessment 4	
	Yes/No	Sign/Date	Yes/No	Sign/Date	Yes/No	Sign/Date	Yes/No	Sign/Date
23. Participates in appropriate decision making regarding safe staffing levels, appropriate skill mix and understands process for escalating concerns. (6ISQC 6.2, A4 2.6.2)								
24. Demonstrates understanding of processes involved in managing near misses, critical incidents or major incidents. (6ISQC 6.8, 6.9, 6.12)								
Confidently coordinates person-centred care								
25. Co-ordinates the care for people with complex co-morbidities and understands the principles of partnership collaboration and interagency working in managing multiple care needs. (7CC, 7.1, 7.2, 7.5, 7.6)								
26. Evaluates the quality of peoples' experience of complex care, maintains optimal independence and avoids unnecessary interventions and disruptions to their lifestyle. (7CC 7.7, 7.8)								
27. Engages in difficult conversations including breaking bad news with compassion and sensitivity. (A2.9)								
28. Facilitates the safe discharge and transition of people with complex care needs advocating on their behalf when required. (7CC 7.4, 7.9, 7.10)								

Confidently coordinates person-centred care								
	YES = Achieved, NO = Not Achieved							
	Assessment 1		Assessment 2		Assessment 3		Assessment 4	
	Yes/No	Sign/Date	Yes/No	Sign/Date	Yes/No	Sign/Date	Yes/No	Sign/Date
29. Assess and reviews the individual care needs and preferences of people and their families and carers at the end of life, respecting cultural requirements and preferences. (ANPC 3.14, 4PEC 4.9, B10.3, B10.6)								

If any proficiency has not been assessed or is not applicable to the Practice area, please leave blank.

The following proficiencies can be achieved in Part 2 or Part 3. These are currently reflected in the Part 2 document and the OAR. The Practice Assessor should check the student record in the OAR to confirm if the proficiencies have been achieved or not in Part 2. If the student is achieving these proficiencies in Part 3, record achievement below and in the OAR

	YES = Achieved, NO = Not Achieved							
	Assessment 1		Assessment 2		Assessment 3		Assessment 4	
	Yes/No	Sign/Date	Yes/No	Sign/Date	Yes/No	Sign/Date	Yes/No	Sign/Date
Part 2, No. 3 Recognise people at risk of self-harm and/or suicidal ideation and demonstrates the knowledge and skills required to support person-centred evidence-based practice using appropriate risk assessment tools as needed.								
Part 2, No. 4 Demonstrates an understanding of the needs of people and families for care at the end of life and contributes to the decision-making relating to treatment and care preferences.								
Part 2, No. 10 Utilises aseptic techniques when undertaking wound care and in managing wound and drainage processes (including management of sutures and vacuum removal where appropriate).								
Part 2, No. 14 Insert, manage and remove urinary catheters for all genders and assist with clean, intermittent self-catheterisation where appropriate.								

	YES = Achieved, NO = Not Achieved							
	Assessment 1		Assessment 2		Assessment 3		Assessment 4	
	Yes/No	Sign/Date	Yes/No	Sign/Date	Yes/No	Sign/Date	Yes/No	Sign/Date
Part 2, No. 15 Undertakes, responds to and interprets neurological observations and assessments and can recognise and manage seizures (where appropriate).								
Part 2, No. 19 Undertakes a comprehensive respiratory assessment including chest auscultation e.g. peak flow and pulse oximetry (where appropriate) and manages the administration of oxygen using a range of routes.								
Part 2, No. 20 Uses best practice approaches to undertake nasal and oral suctioning techniques.								
Part 2, No. 24 Undertakes an effective cardiac assessment and demonstrates the ability to undertake an ECG and interpret findings.								

	YES = Achieved, NO = Not Achieved							
	Assessment 1		Assessment 2		Assessment 3		Assessment 4	
	Yes/No	Sign/Date	Yes/No	Sign/Date	Yes/No	Sign/Date	Yes/No	Sign/Date
Part 2 No, 25 Demonstrates knowledge and skills related to safe and effective venepuncture and can interpret normal and abnormal blood profiles. (B2.2)								
Part 2 No, 26 Demonstrates knowledge and skills related to safe and effective cannulation in line with local policy. (B2.2)								
Part 2 No, 27 Manage and monitor blood component transfusions in line with local policy and evidence based practice. (4PEC 4.12, B2.4)								
Part 2 No, 28 Can identify signs and symptoms of deterioration and sepsis and initiate appropriate interventions as required. (B 1.2.3, B2.13)								

Part 3 Episode of Care 1

This assessment must be undertaken and assessed by a Practice Assessor by the end of Part 3
Guidelines

The student will be given the opportunity to supervise and teach a junior learner/colleague in practice and provide a written reflection on this experience. This needs to be based on the delivery of direct person-centred care. Professionalism underpins all aspects of the student's performance. (BAP 1)

The aim of this assessment is to demonstrate the student's progression in the following five platforms within the *Future Nurse: Standards of proficiency (including skills from annexe A and B)* (NMC 2018) **in the context of their intended field(s) of practice:**

- Assessing needs and planning care
- Providing and evaluating care
- Improving safety and quality of care
- Leading nursing care and working in team
- Coordinating care

Effective communication and relationship management skills underpin all aspects of care. (Annex A)

Students are required to use appropriate approaches and techniques considering the person's motivation, capacity and need for reasonable adjustment applying understanding of mental capacity and health legislation as appropriate.

Learning outcomes (Annexe B 11.1 – 11.11)

The student is able to:

1. Supervise and teach less experienced students and colleagues, appraising the quality of the nursing care they provide, documenting performance, promoting reflection and providing constructive feedback. (5LMNCWIT 5.8, 5.9, 5.10)
2. Demonstrate an understanding of the factors that both facilitate and impede learning in practice. (4PEC 4.1, 5LNCWIT 5.8, 5.9)
3. Demonstrate leadership potential in the assessment, planning, implementation and evaluation of care. (5LNCWIT5.6)
4. Apply the appropriate knowledge and skills in appraising the quality of the nursing care provided by the junior learner colleague. (5LNCWIT 5.10)
5. Demonstrate effective verbal, non-verbal communication and interpersonal skills in engaging with the learner and others involved in the care and act as a positive role model. (4PEC 4.3)
6. Critically reflect on their own role and the role of the nurse in the supervision, facilitation and evaluation of learning for the whole team. (5LNCWIT 5.3, 5.9, 5.10)

Student reflection on an episode of care	
<p>Within your reflection, describe the episode of care and how you planned and supervised the junior learner/peer in practice who delivered person-centred care.</p> <p>What did you do well?</p>	<p>What would you have done differently?</p> <p>What learning from this episode of care will support your professional development going forward in your teaching and learning role?</p>

Practice Assessor feedback Based on the student's reflection, your observation and discussion of the episode of care, please assess and comment on the following: YES = Achieved No = Not Achieved (Refer to Criteria for Assessment in Practice)		
Proficiencies	Yes/No	Comments
Assessing, planning, providing and evaluating care Chooses an appropriate care activity for the junior learner/peer to engage in and considers the learner's needs and their current level of knowledge and skills. (5LNCWIT 5.6, 5.7,5.8)		
Leading nursing care and working in teams Effectively prepares the junior learner/peer and provides them with clear instructions and explanations about the care activity they are to engage in. (5LNCWIT 5.3, 5.4, A4.1.1, 4.1.2)		
Improving safety and quality of care The student undertakes a risk assessment to ensure that the person(s) receiving care is not at risk from the learner/care activity. Continuous supervision and support is provided to the junior learner/peer throughout the care activity. (6ISQC 6.5, 6.6)		
Coordinating care: Effectively communicates throughout the care activity, evaluates the care given and provides the junior learner / peer with constructive verbal and written feedback. (CC 7.7, A4.1.1 – 4.1.5)		
If any of the Standards are 'Not Achieved' this will require a re-assessment and the Academic Assessor must be informed		
Student's signature:		Date: Date:
Practice Assessor's signature:		

Part 3 Episode of Care- 2

This assessment must be undertaken and assessed by a Practice Assessor by the end of Part 3

Guidelines

The practice assessor and student will identify an appropriate episode of direct care involving the organisation and management of care for a group/caseload of people with complex care needs. Professionalism underpins all aspects of the student's performance. (BAP 1)

The aim of this assessment is to demonstrate the student's progression in the following six platforms within the *Future Nurse: Standards of proficiency (including skills from annexe A and B)* (NMC 2018) **in the context of their intended field(s) of practice:**

- Promoting health and preventing ill health
- Assessing needs and planning care
- Providing and evaluating care
- Improving safety and quality of care
- Leading and managing nursing care and working in teams
- Coordinating care

Effective communication and relationship management skills underpin all aspects of care. (Annex A)

Students are required to use appropriate therapeutic approaches and techniques considering the person's motivation, capacity and need for reasonable adjustment applying understanding of mental capacity and health legislation as appropriate.

Learning outcomes

The student is able to:

1. Demonstrate the knowledge, skills and ability to coordinate the care for a group of people with complex and multiple care needs and act as a role model in managing person centred, evidence based approach to care. (4PEC4.4)
2. Evaluate a team based approach to the quality of care delivery and demonstrates understanding of the roles, responsibilities and scope of practice of all team members. (5LMNCWIT 5.7, 5.10, A4.2.1)
3. Demonstrate leadership potential in the assessment, planning, implementation and evaluation of care within the practice setting through effective interaction and engagement with people, services and communities. (5LMNCWIT 5.5,5.6)
4. Critically appraise the quality and effectiveness of nursing care, demonstrate how to use service delivery evaluation in practice and how to bring about service improvement and audit findings to improve care. (6ISQC 6.7)

Student reflection on the Episode of Care

Reflect on how you have worked in partnership with health and social care professionals, service users, carer and families ensuring that decision- making about care is shared.

What did you do well?

What would you have done differently?

What learning from this episode of care could be transferred to other areas of practice?

Practice Assessor feedback Based on the student's reflection, your observation and discussion of the episode of care, please assess and comment on the following: YES = Achieved No = Not Achieved (Refer to Criteria for Assessment in Practice)		
Proficiencies	Yes/No	Comments
Promoting health and preventing ill health Discusses the possible influences on the person's/group of people's mental health and physical health and can highlight a range of factors impacting on them and the wider community. (2PHPIH 2.1, 2.4)		
Assessing needs and planning care Utilises relevant knowledge and skills to undertake a comprehensive assessment, continually monitor a person's condition, interpret signs of deterioration or distress and report appropriately. (3ANPC 3.4,3.12, 3.11, 4PEC 4.10, B10.1)		
Providing and evaluating care Applies relevant knowledge and skills in the provision of more complex person-centred, evidence based care demonstrating effective communication skills and the ability to document effectively. (4PEC 4.10, 7CC 7.7, 7.8, A 1.8, 1.10, A1.11)		
Improving safety and quality of care Undertakes relevant risk assessments, discusses risk management and can propose improvements to enhance the quality of care. (6ISQC 6.4, 6.5, 6.6, 6.9, 7CC7.11)		
Coordinating and leading nursing care Supports the person/persons receiving care and their families in maintaining independence and minimising disruption to their lifestyle, demonstrating understanding of the need for multi-agency working. (5LMNCWIT5.4, 7CC 7.8)		
If any of the Standards are 'Not Achieved' this will require a re-assessment and the Academic Assessor must be informed		
Student's signature:		Date:
Practice Assessor's signature:		Date:

Part 3 Medicines Management

This assessment must be completed by the end of Part 3 where the student safely administers medicines to a group of patients/service users or a caseload of patients/service users in community settings.

During Part 3 the student should be consolidating their knowledge, skills and competencies in relation to the safe administration of medicines. This assessment should normally be undertaken with a small group of patients/service users or caseload.

The student must be allowed a number of practice opportunities to administer medicines under supervision prior to this assessment.

The student must work within the legal and ethical frameworks that underpin safe and effective medicines management and work within national and local policies.

Regulatory requirements: *Future Nurse: Standards of proficiency (including skills from annexe A and B)* (NMC 2018) *The Code* (NMC 2015), *A Competency Framework for all Prescribers* (The Royal Pharmaceutical Society 2016)

The aim of this assessment is to demonstrate the student's knowledge and competence in administering medications safely.

Learning outcomes (Annexe B 11.1 – 11.11, 4PEC 4.17)

The Student is able to:

1. Apply knowledge of pharmacology, how medicines act and interact in the systems of the body, and their therapeutic action. (4PEC 4.14, 4.15)
2. Prepare medications where necessary, safely and effectively administer these via common routes and maintains accurate records. (B11.2, B11.8)
3. Demonstrate proficiency and accuracy when calculating dosages for a range of prescribed medicines. (1BAP 1.15, 4PEC 4.13, B11.4)
4. Administer and monitor medications using vascular access devices and enteral equipment, where appropriate. (B11.4, B11.9)
5. Recognise and respond to adverse or abnormal drug reactions to medications. (B11.10)
6. Maintain safety and safeguard the patient from harm, including awareness of non-adherence, demonstrating understanding of the Mental Capacity Act (DH 2005) and the Mental Health Act (DH 1983, amended 2007), where appropriate. (6ISQC 6.1)

YES = Achieved No = Not Achieved			
Competency	Yes/No	Competency	Yes/No
1. Is aware of the patient/service user's plan of care and the reason for medication demonstrating knowledge of pharmacology for commonly prescribed medicines within the practice area		7. Prepares medication safely. Checks expiry date. Notes any special instructions/contraindications	
2. Communicates appropriately with the patient/service user. Provides clear and accurate information and checks understanding		8. Calculates doses accurately and safely <ul style="list-style-type: none"> • Demonstrates to assessor the component parts of the calculation • Minimum of 5 calculations undertaken demonstrating increased complexity 	
3. Understands safe storage of medications in the care environment		9. Checks and confirms the patient/service user's identity and establishes consent (ID band or other confirmation if in own home)	
4. Maintains effective hygiene/infection control throughout		10. Administers or supervises self-administration safely under direct supervision Verifies that oral medication has been swallowed.	
5. Checks prescription thoroughly <ul style="list-style-type: none"> • Right patient/service user • Right medication • Right time/Date/Valid period • Right dose/last dose • Right route/method • Special instructions 		11. Describes/demonstrates the procedure in the event of reduced capacity and non-adherence	
		12. Safely utilises and disposes of equipment	
		13. Maintains accurate records. <ul style="list-style-type: none"> • Records, signs and dates when safely administered 	
		14. Monitors effects and has an understanding of common side effects, contraindications incompatibilities, adverse reactions, prescribing errors and the impact of polypharmacy	
6. Checks for allergies and sensitivities demonstrating an understanding of risks and managing these as appropriate <ul style="list-style-type: none"> • Asks patient/service user • Checks prescription chart or identification band 		15. Uses relevant frameworks for medicine use as appropriate. E.g. local formularies, care pathways, protocols and guideline	
		16. Offers patient /service users and their carers further support/advice/education. Including discharge/safe transfer where appropriate	

Practice Assessor Feedback		
Student reflection on learning and development		
Student's Name:	Signature:	Date:
Practice Assessor's Name:	Signature:	Date:

Action Plan

An action plan is required when a student's performance causes concern

The Practice Assessor must liaise with the Academic Assessor and senior practice representative

The **SMART** principles should be used to construct the Action Plan.

Placement Name		Date action plan initiated:		
Nature of concern Refer to Professional Value(s), Proficiency and/or Episode of Care (Specific)	What does the student need to demonstrate; <i>objectives and measure of success</i> (Measurable, Achievable and Realistic)	Support available and who is responsible	Date for review (Timed)	Review/feedback
				Date: Comments:
Student's Name:		Signature:		Practice Assessor Name: Signature:
Practice Assessor's Name:		Signature:		
Academic Assessor's Name:		Signature:		

Action Plan

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The **SMART** principles should be used to construct the Action Plan.

Placement Name		Date action plan initiated:		
Nature of concern Refer to Professional Value(s), Proficiency and/or Episode of Care (Specific)	What does the student need to demonstrate; <i>objectives and measure of success</i> (Measurable, Achievable and Realistic)	Support available and who is responsible	Date for review (Timed)	Review/feedback
				Date: Comments:
Student's Name:			Signature:	Date:
Practice Assessor's Name:			Signature:	Date:
Academic Assessor's Name:			Signature:	Date:
				Practice Assessor Name: Signature:

PRACTICE HOURS

Please start a new page per placement

To be completed as per your local University Requirements

Please ensure all details are printed CLEARLY and sickness days identified. All hours completed, alterations and totals should be initialled by a member of staff

	Date	Placement	Total Hrs	Staff Initials	Shift Type		Date	Placement	Total Hrs	Staff Initials	Shift Type
Example of hours confirmation						Sun	1/7/19	Pixie Ward	7.5	FF	E
Mon						Mon					
Tue						Tue					
Wed						Wed					
Thu						Thu					
Fri						Fri					
Sat						Sat					
Sun						Sun					
		Weekly Total =						Weekly Total =			
Mon						Mon					
Tue						Tue					
Wed						Wed					
Thu						Thu					
Fri						Fri					
Sat						Sat					
Sun						Sun					
		Weekly Total =						Weekly Total =			
Mon						Mon					
Tue						Tue					
Wed						Wed					
Thu						Thu					
Fri						Fri					
Sat						Sat					
Sun						Sun					
		Weekly Total =						Weekly Total =			
Mon						Mon					
Tue						Tue					
Wed						Wed					
Thu						Thu					
Fri						Fri					
Sat						Sat					
Sun						Sun					
		Weekly Total =						Weekly Total =			

Total hours of completed practice on this page

Figures

Words

Total hours of Sickness/Absence on this page

Figures

Words

Staff member: I have checked the hours of experience recorded by the student,

Signed: _____ (Staff member)

Name (print): _____

Placement Area: _____

Date: _____

Declaration by Student: I confirm that the hours recorded on this sheet are a true and accurate account of the shifts I have worked.

Signed: : _____ (Student)

Date: _____

It is expected that the student will work a range of shifts to meet NMC Requirements

Shift Codes D = Day Shift, N= Night Shift, S= Sickness, A = Absent

This Practice Assessment Document has been developed by the Pan London Practice Learning Group in collaboration with practice partners, mentors, academic staff, students and service users across the London Region. This work has been led by Jane Fish as Project Manager.

Membership of the Pan London Practice Learning Group (PLPLG)

- ☐ Kathy Wilson, Associate Professor, Head of Practice Based Learning, Middlesex University (Chair)
- ☐ Nicki Fowler, Programme Leader/Professional Lead, Learning Disabilities, University of Greenwich (Vice Chair)
- ☐ Lynn Quinlivan, Practice Programme Co-Ordinator for Pre-Registration Nursing, University of Hertfordshire
- Sue Woodward, Senior Lecturer, King's College London
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